

ANNUAL STATEMENT

For the Year Ending December 31, 2003

OF THE CONDITION AND AFFAIRS OF THE

OmniCare Health Plan

NAIC Group Code	0000	0000	NAIC Company Code	95582	Employer's ID Number	38-2031377
	(Current Period)	(Prior Period)				
Organized under the Laws of	Michigan		State of Domicile or Port of Entry	Michigan		
Country of Domicile	United States of America					
Licensed as business type:	Life, Accident & Health[ ]		Property/Casualty[ ]		Hospital, Medical & Dental Service or Indemnity[ ]	
	Dental Service Corporation[ ]		Vision Service Corporation[ ]		Health Maintenance Organization[X]	
	Other[ ]		Is HMO Federally Qualified? Yes[X] No[ ]			
Date Incorporated or Organized	09/23/1972			Date Commenced Business	12/23/1973	
Statutory Home Office	1155 Brewery Park, Suite 250			Detroit, MI 48207		
	(Street and Number)			(City, or Town, State and Zip Code)		
Main Administrative Office	1155 Brewery Park, Suite 250					
	Detroit, MI 48207			(313)393-2379		
	(City or Town, State and Zip Code)			(Area Code) (Telephone Number)		
Mail Address	1155 Brewery Park, Suite 250			Detroit, MI 48207		
	(Street and Number or P.O. Box)			(City, or Town, State and Zip Code)		
Primary Location of Books and Records	1155 Brewery Park, Suite 250					
	Detroit, MI 48207			(313)393-2379		
	(City, or Town, State and Zip Code)			(Area Code) (Telephone Number)		
Internet Website Address	WWW.ochp.com					
Statutory Statement Contact	Kenyata J. Rogers, Controller			(313)393-2379		
	(Name)			(Area Code)(Telephone Number)(Extension)		
	Krogers@ochp.com			(313)393-4743		
	(E-Mail Address)			(Fax Number)		
Policyowner Relations Contact						
				(Street and Number)		
				(City, or Town, State and Zip Code)		
				(Area Code) (Telephone Number)(Extension)		

OFFICERS

Deputy Rehabilitator Bobby L. Jones

Deputy Rehabilitator Beverly Allen

VICE PRESIDENTS

DIRECTORS OR TRUSTEES

Herman B. Gray M.D.

Tej Mattoo M.D.

George Shade M.D.

State of Michigan

County of Wayne ss

The officers of this reporting entity, being duly sworn, each depose and say that they are the described officers of the said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC Annual Statement Instructions and Accounting Practices and Procedures manual except to the extent that: (1) state law may differ; or, (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures, according to the best of their information, knowledge and belief, respectively.

(Signature)	(Signature)	(Signature)
Bobby Jones	Beverly Allen	
(Printed Name)	(Printed Name)	(Printed Name)
Deputy Rehabilitator	Deputy Rehabilitator	Treasurer
	a. Is this an original filing?	Yes[X] No[ ]
	b. If no,	
	1. State the amendment number	
	2. Date filed	
	3. Number of pages attached	

Subscribed and sworn to before me this

day of , 2004

(Notary Public Signature)



**EXHIBIT 3 - ACCIDENT AND HEALTH PREMIUMS DUE AND UNPAID**

1 Name of Debtor	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 Over 90 Days	6 Nonadmitted	7 Admitted
0199999 Total individuals .....	537	273	3,629			4,439
<b>Group Subscribers:</b>						
City of Detroit .....	1,002,968	872,110	10,484			1,885,562
FEHBP .....	373,542	204,352				577,894
0299997 Subtotal - Group Subscribers: .....	1,376,511	1,076,462	10,484			2,463,456
0299998 Premium due and unpaid not individually listed .....	308,316	39,363	12,457	43,281	43,281	360,136
0299999 Total group .....	1,684,827	1,115,826	22,941	43,281	43,281	2,823,592
0399999 Premiums due and unpaid from Medicare entities .....						
0499999 Premiums due and unpaid from Medicaid entities .....						
0599999 Accident and health premiums due and unpaid (Page 2, Line 12) ..	1,685,363	1,116,098	26,571	43,281	43,281	2,828,031

**EXHIBIT 4 - HEALTH CARE RECEIVABLES**

1 Name of Debtor	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 Over 90 Days	6 Nonadmitted	7 Admitted
<b>Receivables not individually listed</b>						
Pharmacy Rebate Receivable .....	395,430	337,390				732,820
State of Michigan Receivable .....	847,522	38,088				885,610
Wayne State University Physicians .....				2,150,000	2,150,000	
0499999 Total - Receivables not inidividually listed .....	323,437					323,437
0599999 Health care receivables .....	1,566,389	375,478		2,150,000	2,150,000	1,941,867

**EXHIBIT 5 - CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)**  
**Aging Analysis of Unpaid Claims**

1 Account	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 91 - 120 Days	6 Over 120 Days	7 Total
<b>Individually Listed Claims Unpaid</b>						
The Detroit Medical Center .....	303,959	28,018	29,026	29,012	2,483,857	2,873,873
0199999 Total - Individually Listed Claims Unpaid .....	303,959	28,018	29,026	29,012	2,483,857	2,873,873
0299999 Aggregate Accounts Not Individually Listed - Uncovered .....	49,875	1,393	517	262	469	52,515
0399999 Aggregate Accounts Not Individually Listed - Covered .....	5,055,383	112,571	41,745	21,151	237,862	5,468,712
0499999 Subtotals .....	5,409,216	141,982	71,288	50,425	2,722,189	8,395,100
0599999 Unreported claims and other claim reserves .....						12,339,983
0699999 Total Amounts Withheld .....						
0799999 Total Claims Unpaid .....						20,735,083
0899999 Accrued Medical Incentive Pool and Bonus Amounts .....						869,646

**EXHIBIT 6 - AMOUNTS DUE FROM PARENT, SUBSIDIARIES AND AFFILIATES**

1 Name of Affiliate	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 Over 90 Days	6 Nonadmitted	Admitted	
						7 Current	8 Non-Current
<b>Individually listed receivables</b>							
OmniCare TPA, .....	992,937					992,937	
0199999 Total - Individually listed receivables .....	992,937					992,937	
0299999 Receivables not inidividually listed .....							
0399999 Total gross amounts receivable .....	992,937					992,937	

**EXHIBIT 7 - AMOUNTS DUE TO PARENT, SUBSIDIARIES AND AFFILIATES**

1 Affiliate	2 Description	3 Amount	4 Current	5 Non-Current
	<div>NONE</div>			
0399999 Total gross payables .....	..... X X X .....	.....	.....	.....

**EXHIBIT 8 - PART 1 - SUMMARY OF TRANSACTIONS WITH PROVIDERS**

		1	2	3	4	5	6
Payment Method		Direct Medical Expense Payment	Column 1 as a % of Total	Total Members Covered	Column 3 as a % of Total	Column 1 Expenses Paid to Affiliated Providers	Column 1 Expenses Paid to Non-Affiliated Providers
<b>Capitation Payments:</b>							
1.	Medical groups .....	16,252,176	10.631	924,664	100.000		16,252,176
2.	Intermediaries .....						
3.	All other providers .....	26,377,556	17.255				26,377,556
4.	Total capitation payments .....	42,629,732	27.886	924,664	100.000		42,629,732
<b>Other Payments:</b>							
5.	Fee-for-service .....	6,200,303	4.056	X X X	X X X		6,200,303
6.	Contractual fee payments .....	104,041,491	68.058	X X X	X X X		104,041,491
7.	Bonus/withhold arrangements - fee-for-service .....			X X X	X X X		
8.	Bonus/withhold arrangements - contractual fee payments .....			X X X	X X X		
9.	Non-contingent salaries .....			X X X	X X X		
10.	Aggregate cost arrangements .....			X X X	X X X		
11.	All other payments .....			X X X	X X X		
12.	Total other payments .....	110,241,794	72.114	X X X	X X X		110,241,794
13.	Total (Line 4 plus Line 12) .....	152,871,526	100.000	X X X	X X X		152,871,526

**EXHIBIT 8 - PART 2 - SUMMARY OF TRANSACTIONS WITH INTERMEDIARIES**

1	2	3	4	5	6
NAIC Code	Name of Intermediary	Capitation Paid	Average Monthly Capitation	Intermediary's Total Adjusted Capital	Intermediary's Authorized Control Level RBC
		NONE			
9999999 .....			X X X .....	X X X .....	X X X .....



**EXHIBIT 9 - FURNITURE, EQUIPMENT AND SUPPLIES OWNED**

		1	2	3	4	5	6
Description		Cost	Improvements	Accumulated Depreciation	Book Value Less Encumbrances	Assets Not Admitted	Net Admitted Assets
1.	Administrative furniture and equipment .....						
2.	Medical furniture, equipment and fixtures .....						
3.	Pharmaceuticals and surgical supplies .....						
4.	Durable medical equipment .....						
5.	Other property and equipment .....						
6.	Total .....						

NONE



**EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)**

REPORT FOR: 1. CORPORATION:      2. DIVISION:

NAIC Group Code 0000

BUSINESS IN THE STATE OF **GRAND TOTAL** DURING THE YEAR

NAIC Company Code 95582

	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	11	12	13
		2	3										
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Stop Loss	Disability Income	Long-Term Care	Other
<b>Total Members at end of:</b>													
1. Prior Year .....	78,665	205	12,675				3,425		62,360				
2. First Quarter .....	77,644	177	11,766				2,998		62,703				
3. Second Quarter .....	77,313	167	11,303				3,061		62,782				
4. Third Quarter .....	77,842	163	11,350				3,006		63,323				
5. Current Year .....	77,255	159	11,093				3,051		62,952				
6. Current Year Member Months .....	924,664	2,006	135,868				36,877		749,913				
<b>Total Member Ambulatory Encounters for Year:</b>													
7. Physician .....	623,779	1,353	91,657				24,877		505,892				
8. Non-Physician .....													
9. Total .....	623,779	1,353	91,657				24,877		505,892				
10. Hospital Patient Days Incurred .....	37,589	46	3,081				839		33,623				
11. Number of Inpatient Admissions .....	8,220	13	762				213		7,232				
12. Health Premiums Collected .....	171,509,513	527,836	26,952,980				7,883,617		136,145,080				
13. Life Premiums Direct .....													
14. Property/Casualty Premiums Written .....													
15. Health Premiums Earned .....	172,578,849	526,931	26,898,839				7,510,557		137,642,522				
16. Property/Casualty Premiums Earned .....													
17. Amount Paid for Provision of Health Care Services .....	152,871,523	818,496	21,502,071				6,717,946		123,833,010				
18. Amount of Incurred for Provision of Health Care Services .....	150,028,013	919,962	20,786,365				6,478,251		121,843,435				

35 Grand Total

(a) For health business: number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....



**EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)**

REPORT FOR: 1. CORPORATION:      2. DIVISION:

NAIC Group Code 0000

BUSINESS IN THE STATE OF **MICHIGAN** DURING THE YEAR

NAIC Company Code 95582

	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	11	12	13
		2	3										
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Stop Loss	Disability Income	Long-Term Care	Other
<b>Total Members at end of:</b>													
1. Prior Year .....	78,665	205	12,675				3,425		62,360				
2. First Quarter .....	77,644	177	11,766				2,998		62,703				
3. Second Quarter .....	77,313	167	11,303				3,061		62,782				
4. Third Quarter .....	77,842	163	11,350				3,006		63,323				
5. Current Year .....	77,255	159	11,093				3,051		62,952				
6. Current Year Member Months .....	924,664	2,006	135,868				36,877		749,913				
<b>Total Member Ambulatory Encounters for Year:</b>													
7. Physician .....	623,779	1,353	91,657				24,877		505,892				
8. Non-Physician .....													
9. Total .....	623,779	1,353	91,657				24,877		505,892				
10. Hospital Patient Days Incurred .....	37,589	46	3,081				839		33,623				
11. Number of Inpatient Admissions .....	8,220	13	762				213		7,232				
12. Health Premiums Collected .....	171,509,513	527,836	26,952,980				7,883,617		136,145,080				
13. Life Premiums Direct .....													
14. Property/Casualty Premiums Written .....													
15. Health Premiums Earned .....	172,578,849	526,931	26,898,839				7,510,557		137,642,522				
16. Property/Casualty Premiums Earned .....													
17. Amount Paid for Provision of Health Care Services .....	152,871,523	818,496	21,502,071				6,717,946		123,833,010				
18. Amount of Incurred for Provision of Health Care Services .....	150,028,013	919,962	20,786,365				6,478,251		121,843,435				

(a) For health business: number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....

**SCHEDULE A - VERIFICATION BETWEEN YEARS**

1.	Book/adjusted carrying value, December 31, prior year (prior year statement) .....	
2.	Increase (decrease) by adjustment:	
2.1	Totals, Part 1, Column 10 .....	
2.2	Totals, Part 3, Column 7 .....	
3.	Cost of acquired, (Totals, Part 2, Column 6, net of encumbrances (Column 7) and net of additions and permanent improvements (Column 9)) .....	
4.	Cost of additions and permanent improvements:	
4.1	Totals, Part 1, Column 13 .....	
4.2	Totals, Part 3, Column 9 .....	
5.	Total profit (loss) on sales, Part 3, Column 14 .....	
6.	Increase (decrease) by foreign exchange adjustment .....	
6.1	Totals, Part 1, Column 11 .....	
6.2	Totals, Part 3, Column 8 .....	
7.	Amounts received on sales, Part 3, Column 11 and Part 1, Column 12 .....	
8.	Book/adjusted carrying value at the end of current period .....	
9.	Total valuation allowance .....	
10.	Subtotal (Lines 8 plus 9) .....	
11.	Total nonadmitted amounts .....	
12.	Statement value, current period (Page 2, real estate lines, current period) .....	

NONE

**SCHEDULE B - VERIFICATION BETWEEN YEARS**

1.	Book value/recorded investment excluding accrued interest of mortgages owned, December 31 of prior year .....	
2.	Amount loaned during year:	
2.1	Actual cost at time of acquisitions .....	
2.2	Additional investment made after acquisitions .....	
3.	Accrual of discount and mortgage interest points and commitment fees .....	
4.	Increase (decrease) by adjustment .....	
5.	Total profit (loss) on sale .....	
6.	Amounts paid on account or in full during the year .....	
7.	Amortization of premium .....	
8.	Increase (decrease) by foreign exchange adjustment .....	
9.	Book value/recorded investment excluding accrued interest on mortgages owned at end of current period .....	
10.	Total valuation allowance .....	
11.	Subtotal (Lines 9 plus 10) .....	
12.	Total nonadmitted amounts .....	
13.	Statement value of mortgages owned at end of current period .....	

NONE

**SCHEDULE BA - VERIFICATION BETWEEN YEARS**

1.	Book/adjusted carrying value of long-term invested assets owned, December 31 of prior year .....	(14,006)
2.	Cost of acquisitions during year:	
2.1	Actual cost at time of acquisitions .....	
2.2	Additional investment made after acquisitions .....	
3.	Accrual of discount .....	
4.	Increase (decrease) by adjustment .....	14,006
5.	Total profit (loss) on sale .....	
6.	Amounts paid on account or in full during the year .....	
7.	Amortization of premium .....	
8.	Increase (decrease) by foreign exchange adjustment .....	
9.	Book/adjusted carrying value of long-term invested assets at end of current period .....	
10.	Total valuation allowance .....	
11.	Subtotal (Lines 9 plus 10) .....	
12.	Total nonadmitted amounts .....	
13.	Statement value of long-term invested assets at end of current period .....	

**SCHEDULE D - PART 1A - SECTION 1**

**Quality and Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Types of Issues and NAIC Designations**

Quality Rating Per the NAIC Designation		1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5  Over 20 Years	6  Total Current Year	7 Column 6 as a % of Line 10.7	8 Total From Column 6 Prior Year	9 % From Column 7 Prior Year	10 Total Publicly Traded	11 Total Privately Placed (a)
1.	U.S. Government, Schedules D & DA (Group 1)											
1.1	Class 1	415,966	411,720	251,648			1,079,334	100.00	1,193,588	94.01	1,079,334	
1.2	Class 2								76,048	5.99		
1.3	Class 3											
1.4	Class 4											
1.5	Class 5											
1.6	Class 6											
1.7	TOTALS	415,966	411,720	251,648			1,079,334	100.00	1,269,636	100.00	1,079,334	
2.	All Other Governments, Schedules D & DA (Group 2)											
2.1	Class 1											
2.2	Class 2											
2.3	Class 3											
2.4	Class 4											
2.5	Class 5											
2.6	Class 6											
2.7	TOTALS											
3.	States, Territories and Possessions etc., Guaranteed, Schedules D & DA (Group 3)											
3.1	Class 1											
3.2	Class 2											
3.3	Class 3											
3.4	Class 4											
3.5	Class 5											
3.6	Class 6											
3.7	TOTALS											
4.	Political Subdivisions of States, Territories & Possessions, Guaranteed, Schedules D & DA (Group 4)											
4.1	Class 1											
4.2	Class 2											
4.3	Class 3											
4.4	Class 4											
4.5	Class 5											
4.6	Class 6											
4.7	TOTALS											
5.	Special Revenue & Special Assessment Obligations etc., Non-Guaranteed, Schedules D & DA (Group 5)											
5.1	Class 1											
5.2	Class 2											
5.3	Class 3											
5.4	Class 4											
5.5	Class 5											
5.6	Class 6											
5.7	TOTALS											

**SCHEDULE D - PART 1A - SECTION 1 (continued)**

Quality and Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Types of Issues and NAIC Designations

Quality Rating Per the NAIC Designation		1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 Total Current Year	7 Column 6 as a % of Line 10.7	8 Total From Column 6 Prior Year	9 % From Column 7 Prior Year	10 Total Publicly Traded	11 Total Privately Placed (a)
6.	Public Utilities (Unaffiliated), Schedules D & DA (Group 6)											
6.1	Class 1 .....											
6.2	Class 2 .....											
6.3	Class 3 .....											
6.4	Class 4 .....											
6.5	Class 5 .....											
6.6	Class 6 .....											
6.7	TOTALS .....											
7.	Industrial & Miscellaneous (Unaffiliated), Schedules D & DA (Group 7)											
7.1	Class 1 .....											
7.2	Class 2 .....											
7.3	Class 3 .....											
7.4	Class 4 .....											
7.5	Class 5 .....											
7.6	Class 6 .....											
7.7	TOTALS .....											
8.	Credit Tenant Loans, Schedules D & DA (Group 8)											
8.1	Class 1 .....											
8.2	Class 2 .....											
8.3	Class 3 .....											
8.4	Class 4 .....											
8.5	Class 5 .....											
8.6	Class 6 .....											
8.7	TOTALS .....											
9.	Parent, Subsidiaries and Affiliates, Schedules D & DA (Group 9)											
9.1	Class 1 .....											
9.2	Class 2 .....											
9.3	Class 3 .....											
9.4	Class 4 .....											
9.5	Class 5 .....											
9.6	Class 6 .....											
9.7	TOTALS .....											

NONE

**SCHEDULE D - PART 1A - SECTION 1 (continued)**

**Quality and Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values By Major Types of Issues and NAIC Designations**

Quality Rating Per the NAIC Designation	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 Total Current Year	7 Column 6 as a % of Line 10.7	8 Total From Column 6 Prior Year	9 % From Column 7 Prior Year	10 Total Publicly Traded	11 Total Privately Placed (a)
10. Total Bonds Current Year											
10.1 Class 1 .....	415,966	411,720	251,648			1,079,334	100.00	X X X	X X X	1,079,334	
10.2 Class 2 .....								X X X	X X X		
10.3 Class 3 .....								X X X	X X X		
10.4 Class 4 .....								X X X	X X X		
10.5 Class 5 .....						(c)		X X X	X X X		
10.6 Class 6 .....						(c)		X X X	X X X		
10.7 TOTALS .....	415,966	411,720	251,648			(b) 1,079,334	100.00	X X X	X X X	1,079,334	
10.8 Line 10.7 as a % of Column 6 .....	38.54	38.15	23.32			100.00	X X X	X X X	X X X	100.00	
11. Total Bonds Prior Year											
11.1 Class 1 .....	229,986	649,661	313,941			X X X	X X X	1,193,588	94.01	1,193,588	
11.2 Class 2 .....	76,048					X X X	X X X	76,048	5.99	76,048	
11.3 Class 3 .....						X X X	X X X				
11.4 Class 4 .....						X X X	X X X				
11.5 Class 5 .....						X X X	X X X	(c)			
11.6 Class 6 .....						X X X	X X X	(c)			
11.7 TOTALS .....	306,034	649,661	313,941			X X X	X X X	(b) 1,269,636	100.00	1,269,636	
11.8 Line 11.7 as a % of Col. 8 .....	24.10	51.17	24.73			X X X	X X X	100.00	X X X	100.00	
12. Total Publicly Traded Bonds											
12.1 Class 1 .....	415,967	411,720	251,647			1,079,334	100.00	1,193,588	94.01	1,079,334	X X X
12.2 Class 2 .....								76,048	5.99		X X X
12.3 Class 3 .....											X X X
12.4 Class 4 .....											X X X
12.5 Class 5 .....											X X X
12.6 Class 6 .....											X X X
12.7 TOTALS .....	415,967	411,720	251,647			1,079,334	100.00	1,269,636	100.00	1,079,334	X X X
12.8 Line 12.7 as a % of Col. 6 .....	38.54	38.15	23.32			100.00	X X X	X X X	X X X	100.00	X X X
12.9 Line 12.7 as a % of Line 10.7, Col. 6, Section 10 .....	38.54	38.15	23.32			100.00	X X X	X X X	X X X	100.00	X X X
13. Total Privately Placed Bonds											
13.1 Class 1 .....										X X X	
13.2 Class 2 .....										X X X	
13.3 Class 3 .....										X X X	
13.4 Class 4 .....										X X X	
13.5 Class 5 .....										X X X	
13.6 Class 6 .....										X X X	
13.7 TOTALS .....										X X X	
13.8 Line 13.7 as a % of Col. 6 .....							X X X	X X X	X X X	X X X	
13.9 Line 13.7 as a % of Line 10.7, Col. 6, Section 10 .....							X X X	X X X	X X X	X X X	

(a) Includes \$..... freely tradable under SEC Rule 144 or qualified for resale under SEC Rule 144A.  
(b) Includes \$..... current year, \$..... prior year of bonds with Z designations and \$..... current year, \$..... prior year of bonds with Z\* designations. The letter "Z" means the NAIC designation was not assigned by the Securities Valuation Office (SVO) at the date of the statement. "Z\*" means the SVO could not evaluate the obligation because valuation procedures for the security class is under regulatory review.  
(c) Includes \$..... current year, \$..... prior year of bonds with 5\* designations and \$..... current year, \$..... prior year of bonds with 6\* designations. "5\*" means the NAIC designation was assigned by the SVO in reliance on the insurer's certification that the issuer is current in all principal and interest payments. "6\*" means the NAIC designation was assigned by the SVO due to inadequate certification of principal and interest payments.

**SCHEDULE D - PART 1A - SECTION 2**

**Maturity Distribution of All Bonds Owned December 31, At Book/Adjusted Carrying Values by Major Types of and subtype of Issues**

Distribution by Type		1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5  Over 20 Years	6  Total Current Year	7 Column 6 as a % of Line 10.7	8 Total From Column 6 Prior Year	9 % From Column 7 Prior Year	10 Total Publicly Traded	11 Total Privately Placed
1.	U.S. Governments, Schedules D & DA (Group 1)											
1.1	Issuer Obligations .....	200,603	281,720	153,958			636,281	58.95	1,269,636	100.00	636,281	
1.2	Single Class Mortgage-Backed/Asset-Backed Bonds .....	215,363	130,000	97,690			443,053	41.05			443,053	
1.7	TOTALS .....	415,966	411,720	251,648			1,079,334	100.00	1,269,636	100.00	1,079,334	
2.	All Other Governments, Schedules D & DA (Group 2)											
2.1	Issuer Obligations .....											
2.2	Single Class Mortgage-Backed/Asset-Backed Bonds .....											
	<b>MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:</b>											
2.3	Defined .....											
2.4	Other .....											
	<b>MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES:</b>											
2.5	Defined .....											
2.6	Other .....											
2.7	TOTALS .....											
3.	States, Territories and Possessions, Guaranteed, Schedules D & DA (Group 3)											
3.1	Issuer Obligations .....											
3.2	Single Class Mortgage-Backed/Asset-Backed Bonds .....											
	<b>MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:</b>											
3.3	Defined .....											
3.4	Other .....											
	<b>MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES:</b>											
3.5	Defined .....											
3.6	Other .....											
3.7	TOTALS .....											
4.	Political Subdivisions of States, Territories & Possessions, Guaranteed, Schedules D & DA (Group 4)											
4.1	Issuer Obligations .....											
4.2	Single Class Mortgage-Backed/Asset-Backed Bonds .....											
	<b>MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:</b>											
4.3	Defined .....											
4.4	Other .....											
	<b>MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES:</b>											
4.5	Defined .....											
4.6	Other .....											
4.7	TOTALS .....											
5.	Special Revenue & Special Assessment Obligations etc., Non-Guaranteed, SCH. D & DA (Group 5)											
5.1	Issuer Obligations .....											
5.2	Single Class Mortgage-Backed/Asset-Backed Bonds .....											
	<b>MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:</b>											
5.3	Defined .....											
5.4	Other .....											
	<b>MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES:</b>											
5.5	Defined .....											
5.6	Other .....											
5.7	TOTALS .....											



**SCHEDULE D - PART 1A - SECTION 2 (continued)**

**Maturity Distribution of All Bonds Owned December 31, At Book/Adjusted Carrying Values by Major Types of and subtype of Issues**

	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 Total Current Year	7 Column 6 as a % of Line 10.7	8 Total From Column 6 Prior Year	9 % From Column 7 Prior Year	10 Total Publicly Traded	11 Total Privately Placed
Distribution by Type											
6. Public Utilities (Unaffiliated), Schedules D & DA (Group 6)											
6.1 Issuer Obligations .....											
6.2 Single Class Mortgage-Backed/Asset-Backed Securities .....											
<b>MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:</b>											
6.3 Defined .....											
6.4 Other .....											
<b>MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES:</b>											
6.5 Defined .....											
6.6 Other .....											
6.7 TOTALS .....											
7. Industrial & Miscellaneous (Unaffiliated), Schedules D & DA (Group 7)											
7.1 Issuer Obligations .....											
7.2 Single Class Mortgage-Backed/Asset-Backed Securities .....											
<b>MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:</b>											
7.3 Defined .....											
7.4 Other .....											
<b>MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES:</b>											
7.5 Defined .....											
7.6 Other .....											
7.7 TOTALS .....											
8. Credit Tenant Loans, Schedules D & DA (Group 8)											
8.1 Issuer Obligations .....											
8.7 TOTALS .....											
9. Parent, Subsidiaries and Affiliates, Schedules D & DA (Group 9)											
9.1 Issuer Obligations .....											
9.2 Single Class Mortgage-Backed/Asset-Backed Securities .....											
<b>MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:</b>											
9.3 Defined .....											
9.4 Other .....											
<b>MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES:</b>											
9.5 Defined .....											
9.6 Other .....											
9.7 TOTALS .....											

NONE

**SCHEDULE D - PART 1A - SECTION 2 (continued)**

Maturity Distribution of All Bonds Owned December 31, At Book/Adjusted Carrying Values by Major Types of and subtype of Issues

	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 Total Current Year	7 Column 6 as a % of Line 10.7	8 Total From Column 6 Prior Year	9 % From Column 7 Prior Year	10 Total Publicly Traded	11 Total Privately Placed
Distribution by Type											
10. Total Bonds Current Year											
10.1 Issuer Obligations .....	200,603	281,720	153,958			636,281	58.95	X X X	X X X	636,281	
10.2 Single Class Mortgage-Backed/Asset-Backed Securities .....	215,363	130,000	97,690			443,053	41.05	X X X	X X X	443,053	
<b>MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:</b>											
10.3 Defined .....								X X X	X X X		
10.4 Other .....								X X X	X X X		
<b>MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES:</b>											
10.5 Defined .....								X X X	X X X		
10.6 Other .....								X X X	X X X		
10.7 TOTALS .....	415,966	411,720	251,648			1,079,334	100.00	X X X	X X X	1,079,334	
10.8 Line 10.7 as a % of Column 6 .....	38.54	38.15	23.32			100.00	X X X	X X X	X X X	100.00	
11. Total Bonds Prior Year											
11.1 Issuer Obligations .....	306,034	649,661	313,941			X X X	X X X	1,269,636	100.00	1,269,636	
11.2 Single Class Mortgage-Backed/Asset-Backed Securities .....						X X X	X X X				
<b>MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:</b>											
11.3 Defined .....						X X X	X X X				
11.4 Other .....						X X X	X X X				
<b>MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES:</b>											
11.5 Defined .....						X X X	X X X				
11.6 Other .....						X X X	X X X				
11.7 TOTALS .....	306,034	649,661	313,941			X X X	X X X	1,269,636	100.00	1,269,636	
11.8 Line 11.7 as a % of Column 8 .....	24.10	51.17	24.73			X X X	X X X	100.00	X X X	100.00	
12. Total Publicly Traded Bonds											
12.1 Issuer Obligations .....	415,966	411,720	251,648			1,079,334	100.00	1,269,636	100.00	1,079,334	X X X
12.2 Single Class Mortgage-Backed/Asset-Backed Securities .....											X X X
<b>MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:</b>											
12.3 Defined .....											X X X
12.4 Other .....											X X X
<b>MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES:</b>											
12.5 Defined .....											X X X
12.6 Other .....											X X X
12.7 TOTALS .....	415,966	411,720	251,648			1,079,334	100.00	1,269,636	100.00	1,079,334	X X X
12.8 Line 12.7 as a % of Column 6 .....	38.54	38.15	23.32			100.00	X X X	X X X	X X X	100.00	X X X
12.9 Line 12.7 as a % of Line 10.7, Column 6, Section 10 .....	38.54	38.15	23.32			100.00	X X X	X X X	X X X	100.00	X X X
13. Total Privately Placed Bonds											
13.1 Issuer Obligations .....										X X X	
13.2 Single Class Mortgage-Backed/Asset-Backed Securities .....										X X X	
<b>MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:</b>											
13.3 Defined .....										X X X	
13.4 Other .....										X X X	
<b>MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES:</b>											
13.5 Defined .....										X X X	
13.6 Other .....										X X X	
13.7 TOTALS .....										X X X	
13.8 Line 13.7 as a % of Column 6 .....							X X X	X X X	X X X	X X X	
13.9 Line 13.7 as a % of Line 10.7, Column 6, Section 10 .....							X X X	X X X	X X X	X X X	

**SCHEDULE DA - PART 2**  
**Verification of SHORT-TERM INVESTMENTS Between Years**

		1	2	3	4	5
		Total	Bonds	Mortgage Loans	Other Short-term Investment Assets (a)	Investments in Parent, Subsidiaries and Affiliates
1.	Book/adjusted carrying value, prior year .....	76,048	.....	.....	76,048	.....
2.	Cost of short-term investments acquired .....	.....	.....	.....	.....	.....
3.	Increase (decrease) by adjustment .....	(76,048)	.....	.....	(76,048)	.....
4.	Increase (decrease) by foreign exchange adjustment .....	.....	.....	.....	.....	.....
5.	Total profit (loss) on disposal of short-term investments .....	.....	.....	.....	.....	.....
6.	Consideration received on disposal of short-term investments .....	.....	.....	.....	.....	.....
7.	Book/adjusted carrying value, current year .....	0	.....	.....	0	.....
8.	Total valuation allowance .....	.....	.....	.....	.....	.....
9.	Subtotal (Lines 7 plus 8) .....	0	.....	.....	0	.....
10.	Total nonadmitted amounts .....	.....	.....	.....	.....	.....
11.	Statement value (Lines 9 minus 10) .....	0	.....	.....	0	.....
12.	Income collected during year .....	899	.....	.....	899	.....
13.	Income earned during year .....	951	.....	.....	951	.....

(a) Indicate the category of such assets, for example, joint ventures, transportation equipment:

**45      Schedule DB Part A Verification - ..... NONE**

**45      Schedule DB Part B Verification - ..... NONE**

**46      Schedule DB Part C Verification - ..... NONE**

**46      Schedule DB Part D Verification - ..... NONE**

**46      Schedule DB Part E Verification - ..... NONE**

**47      Schedule DB Part F Sn 1 - Sum Replicated Assets - ..... NONE**

**48      Schedule DB Part F Sn 2 - Recon Replicated Assets - ..... NONE**

**49      Schedule S - Part 1 - Section 2 - ..... NONE**

**50      Schedule S - Part 2 - ..... NONE**

**SCHEDULE S - PART 3 - SECTION 2**

**Reinsurance Ceded Accident and Health Insurance Listed by Reinsuring Company as of December 31, Current Year**

1	2	3	4	5	6	7	8	9	Outstanding Surplus Relief		12	13
									10	11		
NAIC Company Code	Federal ID Number	Effective Date	Name of Company	Location	Type	Premiums	Unearned Premiums (estimated)	Reserve Credit Taken Other than for Unearned Premiums	Current Year	Prior Year	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
<b>Affiliates</b>												
90611 ....	41-1366075 ...	01/01/2003	ALLIANZ LIFE INS CO OF NORTH AMER .....	MN .....	SS/L .....	..... 309,276	.....	.....	.....	.....	.....	.....
0199999 Total - Affiliates .....						..... 309,276	.....	.....	.....	.....	.....	.....
0399999 Totals .....						..... 309,276	.....	.....	.....	.....	.....	.....

**SCHEDULE S - PART 4**  
**Reinsurance Ceded To Unauthorized Companies**

1	2	3	4	5	6	7	8	9	10	11	12	13	14
NAIC Company Code	Federal ID Number	Effective Date	Name of Reinsurer	Reserve Credit Taken	Paid and Unpaid Losses Recoverable (Debit)	Other Debits	Totals (Cols. 5 + 6 + 7)	Letters of Credit	Trust Agreements	Funds Deposited by and Withheld from Reinsurers	Other	Miscellaneous Balances (Credit)	Sum of Cols. 9+10+11+12+13 But Not in Excess of Col. 8
					NONE								
1199999 Totals (General Account and Separate Accounts combined) .....				.....	.....	.....	.....	.....	.....	.....	.....	.....	.....

**SCHEDULE S - PART 5**  
**Five-Year Exhibit of Reinsurance Ceded Business**  
**(000 Omitted)**

	1 2003	2 2002	3 2001	4 2000	5 1999
<b>A. OPERATIONS ITEMS</b>					
1. Premiums .....	69	94	180		
2. Title XVIII-Medicare .....					
3. Title XIX - Medicaid .....	240	228	195		
4. Commissions and reinsurance expense allowance .....					
5. Total hospital and medical expenses .....					
<b>B. BALANCE SHEET ITEMS</b>					
6. Premiums receivable .....					
7. Claims payable .....					
8. Reinsurance recoverable on paid losses .....		125			
9. Experience rating refunds due or unpaid .....					
10. Commissions and reinsurance expense allowances unpaid .....					
11. Unauthorized reinsurance offset .....					
<b>C. UNAUTHORIZED REINSURANCE</b> <b>(DEPOSITS BY AND FUNDS WITHHELD FROM)</b>					
12. Funds deposited by and withheld from (F) .....					
13. Letters of credit (L) .....					
14. Trust agreements (T) .....					
15. Other (O) .....					

**SCHEDULE S - PART 6**  
**Restatement of Balance Sheet to Identify Net Credit For Ceded Reinsurance**

	1	2	3
	As Reported (net of ceded)	Restatement Adjustments	Restated (gross of ceded)
<b>ASSETS (Page 2, Col. 3)</b>			
1. Cash and invested assets (Line 10) .....	6,280,500		6,280,500
2. Accident and health premiums due and unpaid (Line 12) .....	2,828,031		2,828,031
3. Amounts recoverable from reinsurers (Line 13.1) .....			
4. Net credit for ceded reinsurance .....	X X X		
5. All other admitted assets (Balance) .....	3,001,501		3,001,501
6. Total assets (Line 26) .....	12,110,032		12,110,032
<b>LIABILITIES, CAPITAL AND SURPLUS (Page 3)</b>			
7. Claims unpaid (Line 1) .....	20,735,083		20,735,083
8. Accrued medical incentive pool and bonus payments (Line 2) .....	869,646		869,646
9. Premiums received in advance (Line 8) .....			
10. Reinsurance in unauthorized companies (Line 18) .....			
11. All other liabilities (Balance) .....	3,017,838		3,017,838
12. Total liabilities (Line 22) .....	24,622,567		24,622,567
13. Total capital and surplus (Line 30) .....	(12,512,535)	X X X	(12,512,535)
14. Total liabilities, capital and surplus (Line 31) .....	12,110,032		12,110,032
<b>NET CREDIT FOR CEDED REINSURANCE</b>			
15. Claims unpaid .....			
16. Accrued medical incentive pool .....			
17. Premiums received in advance .....			
18. Reinsurance recoverable on paid losses .....			
19. Other ceded reinsurance recoverables .....			
20. Total ceded reinsurance recoverables .....			
21. Premiums receivable .....			
22. Unauthorized reinsurance .....			
23. Other ceded reinsurance payables/offsets .....			
24. Total ceded reinsurance payables/offsets .....			
25. Total net credit for ceded reinsurance .....			



**SCHEDULE Y (continued)**  
**PART 2 - SUMMARY OF INSURER’S TRANSACTIONS WITH ANY AFFILIATES**

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	Federal ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/(Disburse- ments) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred Under Reinsurance Agreements	*	Any Other Material Activity not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/ (Liability)
.. 95582 .. .. 00000 ..	.. 38-2031377 .. .. 38-3639256 ..	OmniCare Health Plan ..... OmniCare TPA .....	.....	.....	.....	.....	.. (14,110,899) .. 14,110,899	.....	.....	.....	.. (14,110,899) .. 14,110,899	.....
9999999 Totals .....			.....	.....	.....	.....	.....	.....	X X X	.....	.....	.....

Schedule Y Part 2 Explanation:

# SUPPLEMENTAL EXHIBITS AND SCHEDULES

## INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of NO to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

	Response
MARCH FILING	
1. Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?	No
2. Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?	Yes
3. Will an actuarial certification be filed by March 1?	Yes
4. Will the Risk-based Capital Report be filed with the NAIC by March 1?	Yes
5. Will the Risk-based Capital Report be filed with the state of domicile, if required by March 1?	Yes
6. Will the SVO Compliance Certification be filed by March 1?	No
7. Will the Life Supplement be filed with the state of domicile and the NAIC by March 1?	No
8. Will the Property/Casualty Supplement be filed with the state of domicile and the NAIC by March 1?	No
APRIL FILING	
9. Will Management's Discussion and Analysis be filed by April 1?	Yes
10. Will the Long-term Care Experience Reporting Forms be filed with the state of domicile by April 1?	No
11. Will the Investment Risks Interrogatories be filed by April 1?	Yes
JUNE FILING	
12. Will an audited financial report be filed by June 1 with the state of domicile?	Yes
Explanations:	

Bar Codes:

Medicare Supplement Insurance Experience Exhibit



SVO Compliance Certification



Health Life Supplement



Health Property / Casualty Supplement



LTC Experience Reporting Form C



**OVERFLOW PAGE FOR WRITE-INS**

**UNDERWRITING AND INVESTMENT EXHIBIT**  
**PART 3 - ANALYSIS OF EXPENSES**

	1 Claim Adjustment Expenses	2 General Administrative Expenses	3 Investment Expenses	4 Total
2504. Maintenance and Office Supplies .....	.....	299,951	.....	299,951
2597. Summary of overflow write-ins for Line 25 .....	.....	299,951	.....	299,951

**LS1      Life Supplement Title Page - ..... NONE**

**LS2      Exhibit 5 - Aggregate Reserve for Life - ..... NONE**

**LS3      Exhibit 5 - Interrogatories - ..... NONE**

**LS4      Exhibit 7 - Deposit Type Contracts - ..... NONE**

**LS5      Schedule S - Part 1 - Section 1 - ..... NONE**

**LS6      Schedule S - Part 3 - Section 1 - ..... NONE**

**OVERFLOW PAGE FOR WRITE-INS**

<b>PS1</b>	<b>Property Supplement Title Page -</b> .....	<b>NONE</b>
<b>PS2</b>	<b>Schedule F Part 1 Assumed Reinsurance -</b> .....	<b>NONE</b>
<b>PS3</b>	<b>Schedule F Part 3 Ceded Reinsurance -</b> .....	<b>NONE</b>
<b>PS4</b>	<b>Schedule P - Part 1 Summary -</b> .....	<b>NONE</b>
<b>PS5</b>	<b>Schedule P - Part 1A -</b> .....	<b>NONE</b>
<b>PS6</b>	<b>Schedule P - Part 1B -</b> .....	<b>NONE</b>
<b>PS7</b>	<b>Schedule P - Part 1C -</b> .....	<b>NONE</b>
<b>PS8</b>	<b>Schedule P - Part 1D -</b> .....	<b>NONE</b>
<b>PS9</b>	<b>Schedule P - Part 1E -</b> .....	<b>NONE</b>
<b>PS10</b>	<b>Schedule P - Part 1F Sn 1 -</b> .....	<b>NONE</b>
<b>PS11</b>	<b>Schedule P - Part 1F Sn 2 -</b> .....	<b>NONE</b>
<b>PS12</b>	<b>Schedule P - Part 1G -</b> .....	<b>NONE</b>
<b>PS13</b>	<b>Schedule P - Part 1H Sn 1 -</b> .....	<b>NONE</b>
<b>PS14</b>	<b>Schedule P - Part 1H Sn 2 -</b> .....	<b>NONE</b>
<b>PS15</b>	<b>Schedule P - Part 1I -</b> .....	<b>NONE</b>
<b>PS16</b>	<b>Schedule P - Part 1J -</b> .....	<b>NONE</b>
<b>PS17</b>	<b>Schedule P - Part 1K -</b> .....	<b>NONE</b>
<b>PS18</b>	<b>Schedule P - Part 1L -</b> .....	<b>NONE</b>
<b>PS19</b>	<b>Schedule P - Part 1M -</b> .....	<b>NONE</b>
<b>PS20</b>	<b>Schedule P - Part 1N -</b> .....	<b>NONE</b>
<b>PS21</b>	<b>Schedule P - Part 1O -</b> .....	<b>NONE</b>

PS22	Schedule P - Part 1P -	NONE
PS23	Schedule P - Part 1R Sn 1 -	NONE
PS24	Schedule P - Part 1R Sn 2 -	NONE
PS25	Schedule P - Part 1S -	NONE
PS26	Schedule P - Part 2 Summary -	NONE
PS27	Schedule P - Part 2A -	NONE
PS27	Schedule P - Part 2B -	NONE
PS27	Schedule P - Part 2C -	NONE
PS27	Schedule P - Part 2D -	NONE
PS27	Schedule P - Part 2E -	NONE
PS28	Schedule P - Part 2F Sn 1 -	NONE
PS28	Schedule P - Part 2F Sn 2 -	NONE
PS28	Schedule P - Part 2G -	NONE
PS28	Schedule P - Part 2H Sn 1 -	NONE
PS28	Schedule P - Part 2H Sn 2 -	NONE
PS29	Schedule P - Part 2I -	NONE
PS29	Schedule P - Part 2J -	NONE
PS29	Schedule P - Part 2K -	NONE
PS29	Schedule P - Part 2L -	NONE
PS29	Schedule P - Part 2M -	NONE
PS30	Schedule P - Part 2N -	NONE
PS30	Schedule P - Part 2O -	NONE
PS30	Schedule P - Part 2P -	NONE
PS31	Schedule P - Part 2R Sn 1 -	NONE
PS31	Schedule P - Part 2R Sn 2 -	NONE
PS31	Schedule P - Part 2S -	NONE
PS32	Schedule P - Part 3 Summary (Work Paper) -	NONE
PS33	Schedule P - Part 3A (Work Paper) -	NONE
PS33	Schedule P - Part 3B (Work Paper) -	NONE
PS33	Schedule P - Part 3C (Work Paper) -	NONE
PS33	Schedule P - Part 3D (Work Paper) -	NONE
PS33	Schedule P - Part 3E (Work Paper) -	NONE
PS34	Schedule P - Part 3F Sn 1 (Work Paper) -	NONE
PS34	Schedule P - Part 3F Sn 2 (Work Paper) -	NONE
PS34	Schedule P - Part 3G (Work Paper) -	NONE
PS34	Schedule P - Part 3H Sn 1 (Work Paper) -	NONE
PS34	Schedule P - Part 3H Sn 2 (Work Paper) -	NONE
PS35	Schedule P - Part 3I (Work Paper) -	NONE
PS35	Schedule P - Part 3J (Work Paper) -	NONE
PS35	Schedule P - Part 3K (Work Paper) -	NONE
PS35	Schedule P - Part 3L (Work Paper) -	NONE
PS35	Schedule P - Part 3M (Work Paper) -	NONE
PS36	Schedule P - Part 3N (Work Paper) -	NONE
PS36	Schedule P - Part 3O (Work Paper) -	NONE
PS36	Schedule P - Part 3P (Work Paper) -	NONE
PS37	Schedule P - Part 3R Sn 1 (Work Paper) -	NONE
PS37	Schedule P - Part 3R Sn 2 (Work Paper) -	NONE
PS37	Schedule P - Part 3S (Work Paper) -	NONE

**OVERFLOW PAGE FOR WRITE-INS**



**INDEX TO HEALTH  
ANNUAL STATEMENT**

Accident and Health Premiums Due and Unpaid (Exhibit 3) .....	18
Aggregate Reserve for Accident and Health Contracts (Underwriting and Investment Exhibit – PT 2D) .....	13
Amounts Due from Parent, Subsidiaries and Affiliates (Exhibit 6) .....	21
Amounts Due to Parent, Subsidiaries and Affiliates (Exhibit 7) .....	22
Analysis of Claims Unpaid Prior Year – Net of Reinsurance (Underwriting and Investment Exhibit – PT 2B) .....	11
Analysis of Expenses (Underwriting and Investment Exhibit – PT 3) .....	14
Analysis of Nonadmitted Assets and Related Items (EX 1) .....	16
Analysis of Operations by Lines of Business .....	07
Assets (Admitted) .....	02
Bonds and Stocks (SCH D) .....	E08
Cash (SCH E – PT 1) .....	E24
Cash Equivalents (SCH E – PT 2) .....	E25
Cash Flow .....	06
Collar, Swap and Forward Agreements (SCH DB – PT C) .....	E19
Counterparty Exposure for Derivative Instruments Open (SCH DB, PT E) .....	E22
Exhibit of Premiums .....	08
Exhibit of Claims Incurred During the Year .....	09
Exhibit of Claims Liability End of Current Year .....	10
Exhibit of Analysis of Claims Unpaid Prior Year .....	11
Exhibit of Development of Paid Claims .....	12
Exhibit of Development of Incurred Claims .....	12
Exhibit of Development Ratio for Incurred Year Claims .....	12
Exhibit of Aggregate Reserve for Accident and Health Contracts .....	13
Exhibit of Analysis of Expenses .....	14
Exhibit of Capital Gains (Losses) .....	15
Exhibit of Net Investment Income .....	15
Exhibit of Analysis of Nonadmitted Assets and Related Items .....	16
Exhibit of Enrollment by Product Type (EX 2) .....	17
Exhibit of Accident and Health Premiums Due and Unpaid .....	18
Exhibit of Health Care Receivables .....	19
Exhibit of Claims Payable (Reported and Unreported) .....	20
Exhibit of Amounts due From Parent, Subsidiaries and Affiliates .....	21
Exhibit of Amounts due To Parent, Subsidiaries and Affiliates .....	22
Exhibit of Summary of Transactions with Providers .....	23
Exhibit of Summary of Transactions with Intermediaries .....	23
Exhibit of Furniture, Equipment and Supplies Owned .....	24
Exhibit of Premiums, Enrollment and Utilization (State Page) .....	35
Five-Year Historical Data .....	34
Futures Contracts (SCH DB, PT D) .....	E20
General Interrogatories .....	27
Information Concerning Activities of Insurer Members of a Holding Company Group (SCH Y) .....	56
Liabilities, Capital and Surplus .....	03
Long-Term Invested Assets (SCH BA) .....	E06
Mortgage Loans (SCH B) .....	E04
Notes to Financial Statements .....	25
Options. Caps and Floors (SCH DB., PT A) .....	E16
Options, Caps and Floors Written (SCH DB, PT B) .....	E17
Organizational Chart (SCH Y, PT 1) .....	56
Overflow Page for Write-Ins .....	59
Premiums and Other Considerations(SCH T) .....	55
Real Estate (SCH A) .....	E01
Reconciliation of Replicated (Synthetic) Assets Open (SCH DB, PT F) .....	47
Reinsurance (SCH S) .....	49

Schedules:	
A - Real Estate .....	E01
B - Mortgage Loans .....	E04
BA - Other Long-Term Invested Assets .....	E06
D - Summary By Country .....	37
D - Bonds and Stocks .....	E08
DA - Part 2 Verification .....	44
DA - Pt 1 - Short-Term Investments .....	E15
DB - Pt A – Options, Caps and Floors, Etc. Owned .....	E16
DB - Pt B – Options, Caps and Floors, Etc. Written .....	E17
DB - Pt C – Collars, Swaps and Forwards .....	E19
DB - Pt D – Futures Contracts and Insurance Futures Contracts .....	E20
DB - Pt E – Counterparty Exposure for Derivative Instruments .....	E22
DB - Pt F – Replicated (Synthetic Asset) Transactions .....	47
E - Part 1 – Cash .....	E24
- Part 2 – Cash Equivalents .....	E25
- Part 3 – Special Deposits .....	E26
S - Reinsurance .....	49
T - Premiums (Allocated by States and Territories) .....	55
Y - Part 1 Information Concerning Activities of Insurer Members of a Holding Company Group .....	56
Y - Part 2 Summary of Insurer’s Transactions With Any Affiliates .....	57
Short-Term Investments (SCH DA) .....	E15
Special Deposits (SCH E, PT 3) .....	E26
State Page – Exhibit of Premiums, Enrollment and Utilization (Separate Page for Each State) .....	35
Statement of Revenue and Expenses .....	04
Summary Investment Schedule .....	26
Summary of Replicated (Synthetic) Assets Open (SCH DB, PT F) .....	47
Summary of Transactions with Providers (Exhibit 8 – Pt 1) .....	23
Summary of Transactions with Intermediaries (Exhibit 8 – Pt 2) .....	23
Supplemental Exhibits and Schedules Interrogatories .....	58
Verifications:	
Schedules A, B and BA .....	36
Schedule D .....	37
Schedule DA – Pt 2 .....	44
Schedule DB – Pts A and B .....	45
Schedule DB – Pts C, D and E .....	46